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(54) Cytotoxic conjugates for cancer therapy.

Novel compositions and methods are provided for the treatment of cancer employing monoclonal antibodies (MoAsb) conjugated to a toxin. According to the present invention, MoAbs defining epitopes on either a tumor associated glycoprotein antigen of about 72 kb mw. or ocacinomethryonic antigen conjugated to a ribosomal inhibiting protein, or the like, are employed either alone or in combination as cytotoxic agents in the treatment of various cancers including, but not limited to, colorectal carcinoma, ovarian carcinoma and osteogenic sarcoms.

Hydridoma: XMMCO-791 and XMMCO-228 were deposited with the A.T.C.C. on August 14, 1986 and given A.T.C.C. Accession Nos. HB 9173 and HB 9174, respectively.

## EUROPEAN SEARCH REPORT

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EP 87 11 1540

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8586-33-1/XXXXX2

## CYTOTOXIC CONJUGATES FOR CANCER THERAPY

CROSS-REFERENCE TO RELATED APPLICATION

This application is a continuation-in-part of U.S. Application Serial No. 06/875,256, filed June 17, 1986, which is a continuation of U.S. Application Serial No. 06/468,193, filed February 22, 1983, the disclosures of which are hereby incorporated by reference.

#### BACKGROUND OF THE INVENTION

### Field of the Invention

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The present invention relates generally to

15 cancer therapy and, more particularly, to the treatment
of colorectal and ovarian carcinoma and osteogenic
sarcoma with cytotoxic conjugates of monoclonal
antibodies (MoAbs) and ribosomal inhibiting proteins
(RIPs).

Colorectal cancer is the second most common cause of death from malignancy in the Western world. The American Cancer Society estimates that there were 138,000 new cases of colorectal cancer and 59,900 patients died from the disease in 1985. The outlook for patients with colorectal disease has remained essentially unaltered over the last 30 years, with the five-year survival being on the order of 30%. A major factor contributing to this is the lack of effective treatment for the disease once it has spread beyond the bowel wall, since surgery during the early stages of the disease offers the only prospect of cure.

Unfortunately, the majority of patients have disseminated disease at the time of initial surgery, primarily with overt or occult hepatic and lymph node metastases.

Despite numerous trials of chemotherapy, the only single agent shown to have any significant effect is 5-fluorouracil; its response rate is inadequate and treatment with it rarely influences the ultimate outcome. Combination chemotherapy and intrahepatic arterial infusion are being investigated but currently do not represent effective treatments.

Cancer of the ovary accounts for roughly 5% of all cancers in women and is the sixth leading cancer in women. Although surgery is curative if this lesion is detected early enough, the mortality associated with this disease has not improved appreciably in the last 25 years.

Ultrasound, laparoscopy or peritoneoscopy,
and CAT scan are of limited value in the diagnosis of
ovarian carcinoma. Serum markers such as
15 carcinoembryonic antigen and placental alkaline
phosphatase as well as some newly defined antigens are
found in the blood of some patients with
adenocarcinoma, although there is no universal marker.
Surgery with biopsy is the only definitive way of
20 diagnosing ovarian carcinoma.

Surgery is currently the only cure for ovarian carcinoma, and is only curative if the tumor has not spread. Radioisotope implants, x-ray irradiation, and chemotherapy are of limited use in the management of ovarian carcinoma.

The most important prognostic indication is the extent of spread of the tumor at the time of diagnosis and surgery. Stage I ovarian carcinoma (growth limited to the ovaries) has an overall 5-year survival rate of approximately 80%, Stage II (growth involving ovaries with pelvic extension) has a 5-year survival rate of 40%, Stage III (growth involving ovaries with extension to small bowel or omentum) has a 5-year survival rate of 10%, and Stage IV (distant

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metastases) has a 5-year survival rate 37% of (1973-60), relatively the same as for 1960-63 (32%).

Imaging studies of ovarian carcinoma with radiolabelled MoAbs have been performed to a limited degree in human and animal systems. Tumors as small as 1 mm in diameter in mice bearing xenografts of human ovarian cancer have been imaged. The same study also detected tumors in 8 out of 10 patients with ovarian cancer.

Osteogenic sarcoma (OS) is the most common primary bone tumor. Although surgery can be curative if this lesion is detected early enough, the usual course of this disease in 80%-85% of patients is multiple pulmonary metastases and death within two years of diagnosis. These metastases are often present but usually not large enough to be seen at diagnosis of the primary tumor.

Amputation is the treatment of choice for OS.

Limb salvage procedures have been performed, such as
en-block resection and prosthetic replacement. Overall
survival for limb salvage is either as poor or worse

20 than with amputation.

 $\label{eq:Radiation treatment} \mbox{Radiation treatment has not been shown to} \\ \mbox{prevent OS metastases.}$ 

Most recent trials note survival rates of over 50% at 5 years for patients treated by widely 25 diverse adjunctive methods. The question is whether all of these widely diverse forms of treatment are effective or if there is a change in the natural history of the disease.

Imaging studies of OS with radiolabelled 30 MoAbs have been performed to a limited degree in human and animal systems. Human OS xenografts have been imaged in nude mice using an anti-OS MoAb labelled with 131.

Because of the extent of these three forms of cancer, there is a need for new compositions and

methods to treat primary, recurrent and metastatic disease.

## Description of the Relevant Literature

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#### SUMMARY OF THE INVENTION

Novel compositions and methods are provided form the treatment of cancer employing monoclonal antibodies (MoAbs) conjugated to a toxin. According to the present invention, MoAbs defining epitopes on either a tumor associated glycoprotein antigen of about 72 kD m.w. or on carcinoembryonic antigen conjugated to a ribosomal inhibiting protein, or the like, are employed either alone or in combination as cytotoxic agents in the treatment of various cancers including, but not limited to, colorectal carcinoma, ovarian

BRIEF DESCRIPTION OF THE FIGURES

Figure 1 is a graphic illustration of the results obtained in the therapy of mice bearing xenografts of osteogenic sarcoma 791T cells with XMMCO-791-RTA:

Figure 2 is a graphic illustration of the results obtained in the therapy of mice bearing xenografts of colorectal carcinoma C170 cells with XMMCO-791-RTA at a dose of 5 mg/kg/day:

Figure 3 is a graphic illustration of the results obtained in the therapy of mice bearing xenografts of colorectal carcinoma C170 cells with XMMCO-791-RTA at a dose of 3 mg/kg/day; and

Figure 4 is a graphic illustration of the influence of free RTA and XMMCO-228-RTA on the growth of colorectal carcinoma LS174T cell xenografts.

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DETAILED DESCRIPTION OF THE PREFERED EMBODIMENTS

The present invention employs cytotoxic conjugates for the treatment of various forms of cancer, including colorectal carcinoma, ovarian carcinoma and osteogenic sarcoma. These novel conjugates are comprised of monoclonal antibodies or 5 binding fragments thereof, collectively termed immunoclobulins, bound to a cytotoxin. compositions are administered to a cancer cell host in order to destroy cancer cells while doing minimal damage to normal tissue.

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The immunoglobulins of the present invention are employed as targeting agents for directing cytotoxic agents to specific cancer cells within a cancer cell host. According to the present invention. immunoglobulins which define an epitope on a 72 15 kilodalton (kD) glycoprotein antigen and immunoglobulins which define an epitope on carcinoembryonic antigen (CEA) are employed as targeting agents. One or both of these antigens are present on a variety of cancers including, but not 20 limited to, colorectal carcinoma, ovarian carcinoma and osteogenic sarcoma.

These targeting immunoglobulins are bound to a variety of cytotoxic agents, generally ribosomal inhibiting proteins, more particularly, the A chain of 25 ricin or the Achain of abrin. The A chain of ricin has been successfully employed in cytotoxic conjugates as disclosed in U.S. Patent No. 4,590,071, the disclosures of which are hereby incorporated by reference.

The immunoglobulin and toxin are generally 30 bound by a covalent bond, more particularly a disulfide bond, but may be joined by any chemical bond which allows the toxin to travel to the target cell with the immunoglobulin. Other methods for achieving such a bond are well-known to those skilled in the art. The 35 only criteria is that the bond must be achieved in a

manner which does not significantly decrease the binding affinity of the immunoglobulin for its epitope.

The present cytotoxic conjugates may be administered to a cancer cell host either singly or in a cocktail containing two or more conjugate formulations. Cocktails are particularly important in the treatment of heterogenious tumor cell populations wherein targeting of multiple antigens is critical.

The cytotoxic conjugates of the present invention may be administered to a cancer cell host by any convenient method. Pharmaceutical compositions

10 employing the subject conjugates may be administered parenterally, i.e., intravenously, intraparitoneally, or the like. Thus, this invention provides compositions for parenteral administration which comprise a solution of pyrogen free, cytotoxic

15 conjugates, or a cocktail thereof, dissolved in an acceptable carrier, preferably an aqueous carrier. A variety of aqueous carriers can be used, e.g., water,

These solutions are sterile and generally free of
particulate matter. These compositions may be
sterilized by conventional, well-known filtration
sterilization techniques. The compositions may contain
pharmaceutically acceptable auxiliary substances as
required to approximate physiological conditions such

buffered water, 0.4% saline, 0.3% glycine, or the like.

25 as pH adjusting and buffering agents, toxicity adjusting agents, or the like, for example, sodium acetate, sodium chloride, potassium chloride, potassium chloride, calcium chloride, sodium lactate, etc.

The compositions of the present invention can

30 be lyophilized for storage and reconstituted in a
suitable carrier prior to use. This technique has been
shown to be effective with conventional immune
globulins and art-known lyophilization and
reconstitution techniques can be employed. It will be
35 appreciated by those skilled in the art that

lyophilization and reconstitution can lead to varying degrees of antibody activity loss and that use levels may have to be adjusted to compensate.

Single or multiple administrations of the compositions can be carried out with dose levels and pattern being selected by the treating physician. In 5 any event, the pharmaceutical formulation should provide a quantity of conjugate(s) of this invention sufficient to effectively treat the cancer cell host. The dose of conjugate or conjugate cocktail will vary widely, generally from about 0.01 mg/kg/day to 20.0 mg/kg/day, usually about 0.05 mg/kg/day to 10.0 mg/kg/day, and, more particularly, 0.05 mg/kg/day to 5.0 mg/kg/day.

Kits may also be supplied for use with the subject conjugates or cocktails. Thus, the subject compositions may be provided, usually in lyophilized form, either alone or in conjunction with additional chemotherapeutic agents for cancer therapy. These kits may include buffers, such as phosphate buffered saline, other inert ingredients, or the like. The kits may also include specific instructions including suggested protocols for the administration of the subject compositions to a cancer cell host.

The following examples are offered by way of illustration and not limitation.

#### EXPERIMENTAL

EXAMPLE I - XMMCO-791-RTA CONJUGATES

## . Production of XMMCO-791 Hybidomas

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- Balb/c mice (Bantin and Kingman, U.K.) were immunized with cultured 791T cells according to the following schedule:
- 1. Day 0:  $1 \times 10^7$  cells were given intraperitoneally (IP) in Hank's balanced salt solution 35 (HBSS);

- 2. Day 7:  $1 \times 10^7$  cells were given IP in HBSS;
- 3. Day 21: 2 x 10<sup>6</sup> cells were given by intracardiac injection.

The 791T cell line used for immunization was obtained from Dr. Vera S. Byers, University of

5 California, San Francisco. 791T is a human osteogenic sarcoma cell line isolated from the pulmonary metastasis of a 19-year-old Caucasian male. The cell line was characterized as malignant by its ability to grow as a tumor xenograft in nude mice, its lack of

10 contact inhibition in culture and its abnormal nuclear and cytoplasmic morphology.

On day 26 after the initial immunization, spleen cells from immunized mice were aseptically removed. Following procedures as outlined elsewhere (Galfre et al., Nature (1977) 226:550, which is 15 incorporated by reference),  $5 \times 10^7$  spleen cells were fused with an equal number of P3/NSI/1-Ag4-1 cells (A.T.C.C. Accession No. TIB-18) using polyethylene glycol 4000. The P3/NSI/1-Ag4-1 cell line is a non-secreting mouse myeloma cell line of Balb/c origin. 20 This line is resistant to 8-azaguanine and lacks the enzyme hypoxanthine quanine phosphoribosyl transferase so that hypoxanthine- aminopterin-thymidine (HAT) medium becomes toxic, providing a convenient method of selecting unfused parental myeloma cells from the 25

Cloning was performed by rlating cells at low density in 0.3% agar in RPMI 1640 medium supplemented with 50 mg/ml gentomycin and

hybridoma population.

30 hypoxanthine-aminopterin-thymidine (HAT) with 10% fetal calf serum, and overlaying a gel of 0.5% agar in the same medium. Spherical colonies were removed by Pasteur pipette. Recloning was performed by the limiting dilution technique, in which less than one 35 hybridoma per three wells of a 96-well microticter

plate was plated in the presence of 2 x 104 peritoneal evudate cells from unimmunized WAB/Not rats. Medium for regular maintenance was identical to the above. except that no aminopterin was included (HT medium).

The antibodies secreted by each clone were assayed for the appropriate specificity by radioimmune 5 binding assay (Embleton et al., Br. J. Cancer (1981) 43:582-87). One clone, designated XMMCO-791 was found to stably secrete monoclonal antibody: the antibody was determined to be of immunoglobulin class IgG2b. Hybridoma XMMCO-791 is presently on deposit with the American Type Culture Collection (A.T.C.C.), 12301 Parklawn Dr., Rockville, M.D. 20852, U.S.A. deposit was made on August 14, 1986, and given A.T.C.C. Accession No. HB 9173.

Specific pathogen free (SPF) Balb/c mice (Charles River) were used to culture the hybridoma 15 intraperitoneally. Approximately 2 x 10<sup>6</sup> XMMCO-791 hybridoma cells in 0.5 ml of phosphate buffered saline (PBS) pH 7.2 were injected I.P. into pristane primed mice 7 to 21 days post priming. Priming was performed by injecting SPF Balb/c mice I.P. with 0.5 ml Pristane 20 (2,6,10,14-tetramethylpentaclecane). The resultant ascites fluid, collected 10-14 days post injection of hybridomas, contained 1.2 to 1.6 mg/ml of the antibody, as determined by double immunodiffusion.

The antibody in ascites fluid was purified following sterile filtration through a 0.22 p filtering system by loading onto a Staphylococcal protein A column (Staph protein A) and allowed to bind at 4°C. pH 7.5. The effluent was monitored spectrophotometrically until there was no further change of absorbance. The column was then subjected to pH gradient elutions (pH 5.0 and pH 3.0, 0.1 M sodium citrate buffer) and the monoclonal antibody collected. Purified antibody was stored frozen following aliquoting and quick freezing.

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### B. Antibody Binding to Cell Lines

The binding of XMMCO-791 to a large number of cultured human tumor cells and cultured human fibroblasts was compared by various assays to define tumor specific binding. These assays are detailed below. Studies show that there is little binding to normal fibroblasts, granulocytes, red blood cells, or lymphoblastoid cell lines; but there is significant binding to osteogenic sarcoma, colorectal and ovarian carcinoma. Studies described later demonstrate significant binding to freshly disaggregated human colorectal and ovarian carcinoma tumors.

### 125 Protein A-Binding Assay

Target cells in round-bottomed microtest plates were incubated on ice with hybridoma supernatant. The cells were washed and incubated for an additional 1 hour on ice with Protein A (Pharmacia) labeled with <sup>125</sup>I. The cells were washed and dried down. After spraying with a plastic film (Nobecutane), the wells were separated with a band saw and the bound <sup>125</sup>I measured in a gamma counter.

XMMCO-791 hybridoma supernatants were reacted 20 with cultured cells derived from a range of human tumors and normal fibroblasts. Representative data are summarized in Table I. In tests with 36 malignant cell lines and 9 fibroblast cell lines. XMMCO-791 antibody reacted with 7/13 osteogenic sarcomas; 1/3 lung 25 carcinomas, 1/1 prostate carcinomas, and 1/1 cervical carcinomas. 3/5 colorectal carcinomas also reacted ' strongly with binding ratios (BR) up to 33.40. Of the fibroblast lines, 1/9 reacted weakly (BR 2.14). Tests were carried out with fibroblasts derived from the 30 donor of the tumor cell line 791T and these target cells did not react with XMMCO-791 (BR 0.99). Peripheral blood mononuclear cells were also negative.

TABLE I

Reactivity of XMMCO-791 Monoclonal Antibody
Against Cultured Human Cells
(Radioimmunoassay)

	Tumor	Cell	Mean	cnm(+	S.D.) with		Cpm <sup>1</sup>	Binding <sup>2</sup>
	Type		P3NS1			0-791	increment	Ratio
5		22214			23.3.75	722	AND CHICKE	
_	Osteogenic							
	sacroma	791T	480	± 100	10.965	± 378	10,485	22.84
	**	706T	275	± 44		± 260	410	2.49
		781T	553	± 9		± 105	461	1.83
	**	788T	364	± 142		± 1,64		46.82
	**	792T	358	± 55		± 18	85	1.23
	**	803T	274	± 14	399	± 30	125	1.45
10	"	805T	615	± 86		± 28	1.481	3.41
	"	836T	1,071	± 137		± 116	-236	0.78
	"	845T		± 30		± 73	1.145	5.58
	11	888T		± 104		± 85	66	1.08
	**	T278		± 36		± 404	15,696	20.77
	**	205		± 213		± 341	3,147	3.04
	**	393T		± 20		± 123	434	1.64
15		5,01	0,0		1,110	_ 123	7,54	1.04
13								
	Colon							
	Carcinoma	HCT8	427	± 177	689	± 52	262	1.61
	"	HRT18		± 168		± 95	119	1.21
	**	HT29		± 101		± 177	2.952	6.66
	**	LS174T		± 48		± 203	3,520	14.23
		HcLo		± 12	10,087		9,785	33.40
20		110110	302	1 12	10,007	1 033	3,765	33.40
	Lung							
	Carcinoma	A427	220	± 152	250	± 27	30	
	oar critoina	A549		± 137		± 187		1.09
		9812	390			± 46	2,006	4.54
		9012	390	Ι 6	541	I 46	151	1.39
	Breast							
25	Carcinoma	SK Br3	1,624	± 25	2 505	± 258	881	
25	11	578T		± 103		± 65		1.54
	**	734B		± 431			105	1.22
		MCF7		± 431		± 133	423	1.87
		MCF /	/16	± 50	846	± 61	150	1.18
	Melanoma	Nk1-4	285	± 36	25.8	± 70	73	1.25
	"	Mel-2a		± 105		± 13	150	1.25
	**	Me1-57		± 78		± 160	-16	0.97
30	**	MeWo	232			± 36	-16 -4	
	**	RPMI5966		± 94		± 191		0.98
		WI 1112300	3 321	- 54	. 445	T 191	118	1.36

16
TABLE I (continued)

	Tumor Type	Cell Line	Mean P3NS1 s			8.D.)	with XMMC	: 0-:	791	Cpm <sup>1</sup> increment	Binding <sup>2</sup> Ratio
5	Lymphoblas- toid Line	Raji K562	668 1,086						347 115	176 -181	1.26 0.83
	Prostate. Carcinoma	<u>EB33</u>	429	±	66	1	2,147	±	378	11,718	28.3
	Bladder Carcinoma	T24	285	±	40		429	±	28	144	1.50
10	Cervical Carcinoma	HeLa	258	±	18	1	4,257	±	658	13,999	55.52
	Ovarian Carcinoma	PA1	398	±	69		408	±	51	10	1.03
15	Fibro- blasts	181 Sk	784				1,682			898	2.14
	**	788 Sk 791 Sk	1,033 403				927 399		125 54	-106 -4	0.90 0.99
	**	803 Sk	350				362			12	1.03
	**	836 Sk	227				295			68	1.29
	**	860	1,165				1,624			459	1.39
	"	870	404				443			39	1.09
20	"	618 Lu	500				538			38	1.09
	"	74 BM	350	± .	52		593	İ	68	243	1.69
	Non-culture	ed.									
	cells:-	RBC	511	±	14		500	±	42	-71	0.86
	" Mor	onuclear	r								
		cells	410						115	82	1.20
		SRBC	481	±	77		482	±	261	1	1.00
25											

<sup>1</sup> CPM for XMMCO-791 minus cpm for P3NS1 supernatant.

<sup>2</sup> CPM for XMMCO-791 divided by cpm for P3NS1 supernatant. A binding ratio of >2 represents significant reactivity. These positive reactions are underlined.

# 2. <u>Direct Binding Assay with 125 I-Labeled</u> XMMCO-791 Antibody

Tissue culture-derived target cells were aliquoted into round-bottomed microtest plates, sedimented by centrifugation, and incubated for 60 minutes with aliquots of <sup>125</sup>I-XMMCO-791. The cells were washed and dried down. The wells were separated from the plate and bound radioactivity counted (Price MR, et al., 1982; Pimm MV, et al., 1982).

Direct binding of <sup>125</sup>I-labeled XMMCO-791 to a range of tumor cells is shown in Table II and this data is summarized in Table III which expresses target cell binding of XMMCO-791 antibody relative to that with 791T cells. These tests demonstrate that <sup>125</sup>I-XMMCO-791 binds to osteogenic sarcomas 791T and 788T, and to HeLa cells. Binding of <sup>125</sup>I-XMMCO-791 to other cell line derived tumor cells, including lung carcinoma (A427 and A549) and bladder carcinoma (T24), was approximately 10% of that with 791T cells.

#### 3. Flow Cytometry

a. <u>Direct Binding of FITC-Labeled XMMCO-791</u>
Target cells were incubated with saturating doses of fluorescein isothiocyanate-labeled XMMCO-791 (FITC-XMMCO-791) and analyzed by flow cytometry. The binding of FITC-XMMCO-791 is expressed as fluorescence units/cell (Price MR, et al., 1983b; Gallego J. et al., 1984; Roe R. et al., 1985).

20

#### TABLE II

## Binding of <sup>125</sup>I-Labeled XMMCO-791 Monoclonal Antibody to Cultured Human Tumor Cells

	Ехр.	Target Cells	125 I-antibody bound (mean cpm ± SD)
5	1	None Osteogenic sarcoma 791T Breast carcinoma SKBr3 Colon carcinoma HCT8 Lung carcinoma A427	413 ± 189 6,301 ± 605* 772 ± 61 532 ± 157 741 ± 152
10	2	None Osteogenic sarcoma 791T Osteogenic sarcoma 788T Osteogenic sarcoma 888T Bladder carcinoma T24 Colon carcinoma HRT18 Ovarian carcinoma PA1	160 ± 44 3.265 ± 425* 3.356 ± 163* 452 ± 25 506 ± 40 571 ± 60 164 ± 48
15	3	Osteogenic sarcoma 791T Osteogenic sarcoma 788T Osteogenic sarcoma 20s Osteogenic sarcoma 393T	8,915 ± 51* 6,906 ± 25* 7,570 ± 112* 626 ± 6
			105

 $<sup>^{1}2 \</sup>times 10^{5}$  target cells were treated with 0.1 ml  $^{125}$ I-labeled antibody preparation (50 ng protein) in replicates of four.

<sup>\*</sup>Cpm is significantly higher than cpm with other cell lines within the same test as assessed by the Wilcoxon rank test.

#### TABLE III

# Direct Cell Binding of 125 I-labeled XMMCO-791 Monoclonal Antibody

5	Cell Line	Cell Type	Percentage Binding of I-labeled Monoclonal Antibody
10	791T 788T 888T HRT 18 HCT 8 SK Br 3 A427 A594 HeLa PA1 T24 RPMI 5966	Osteogenic sarcoma Osteogenic sarcoma Osteogenic sarcoma Colorectal carcinoma Colorectal carcinoma Breast carcinoma Lung carcinoma Lung carcinoma Cervix carcinoma Ovarian carcinoma Bladder carcinoma Melanoma	100 103 9 13 7 6 11 12 86 0
15		-	

<sup>1</sup>Binding of <sup>125</sup>I-labeled anti-791T/36 monoclonal antibody to various target cell lines is expressed as the percentage of the binding of labeled antibody to 791T tumor cells.

Specificity is demonstrated by mixing unlabeled MoAb with FITC-labeled MoAb and demonstrating that the fluorescence per cell decreased. Titrating FITC-XMMCO-791 antibody against a fixed number of 791T cells indicated that maximum uptake of labeled antibody was obtained at approximately 0.1 µg antibody per 2 x 10<sup>5</sup> cells

Table IV summarizes tests in which target cells derived from human tumor cell lines were reacted with FITC-XMMCO-791 and analyzed by flow cytometry. The antibody consistently reacted with osteogenic 10 sarcoma 791T and 788T cells; these cells were used as standards for reference purposes. Ovarian carcinoma PAl cells showed essentially no reactivity with XMMCO-791. All of the tumors listed bound significant amounts of FITC-XMMCO-791, although this was less than 15 that observed with 791T cells. The C146, C168, and C170 cell lines were recently derived from surgical specimens obtained at the Department of Surgery. University Hospital, Queens Medical Centre, Nottingham. U.K. (Director, Professor J.D. Hardcastle). 20 these tests were carried out with FITC-XMMCO-791 under saturating conditions, the number of antibody molecules bound/cell can be determined (Roe R., et al., 1985). Thus, colon tumor derived cells bound between  $1.6 \times 10^5$ and  $2.8 \times 10^5$  antibody molecules/cell compared with a

value of 6 x 10<sup>5</sup> for osteogenic sarcoma 791T cells.

## TABLE IV

# Binding of FITC-XMMCO-791 Monoclonal Antibody with Cultured Human Tumor Cells

	Tumor Cell	Mean Fluorescene	e
C	osteogenic Sarcoma	Units/cell	
		•	
10			
	791T	709.3, 722.4	245
	788T	368.5	
c	olon Carcinoma	•	
15			
	HCRT18	169	
	LS174T	172.8, 187.6	, 105.2
	C146	117	
	C168	69	
20	C170	88	
0	varian Carcinoma		
	PA1	<9	
25	1.		

# b. Indirect Membrane Immunofluorescence Assay

Tumor cell lines were incubated with saturating amounts of XMMCO-791 monoclonal antibody, then washed and incubated with FITC-labeled rabbit anti-mouse Ig. The samples were analyzed by flow cytometry (Roe R., et al., 1985). Table V summarizes these tests with results expressed as fluorescence units/cell. The results showed the same pattern as with direct immunofluorescence: maximal binding with osteogenic sarcoma cell lines, intermediate with colon carcinoma cell lines, and low levels with ovarian, bladder, and breast carcinoma cell lines.

The binding of XMMCO-791 monoclonal antibody to tumor cells was also compared with that obtained with a range of other murine monoclonal antibodies.

- 15 These include antibodies recognizing CEA epitopes (B14B8, 194.2 and 161) and other anti-colon carcinoma antibodies. These test, summarized in Table VI, show that XMMCO-791 binds to 791T cells, whereas none of the other antibodies were reactive with this cell line.
- 20 Both XMMCO-791 and the anti-CEA antibodies reacted with colon tumor cells (LS174T, C170, HT29) and weakly with bladder carcinoma T24.
  - 4. Complement Dependent Cytotoxicity

The complement dependent cytotoxicity of

25 monoclonal antibody XMMCO-791 for target cells derived
from cultured tumor cell lines was assayed using a 2
hour, 51chromium (51cr) release assay (Price MR, et al., 1982).

Tumor cells (5 x 10<sup>6</sup>) were labeled with <sup>51</sup>Cr.

The cells were aliquoted into microtest plates that contained either medium or diluted monoclonal antibody preparations. As a source of complement, normal rabbit serum was added to each well. Following incubation at room temperature for 2 hours, the supernatants were

collected and the percentage release of <sup>51</sup>Cr was calculated for each test sample.

## TABLE V

### Indirect Membrane Immunofluorescence Binding Activity of XMMCO-791 Monoclonal Antibody as Assessed by Flow Cytofluorimetry

5	Target Cell	Mean Fluorescence Units/Cell
		• .
	Osteogenic Sarcoma	
	791T	1733, 369, 709, 667
	781T	1899
	788T	338, 1572
10		
	Colon Carcinoma	
	нст8	335
	HT29	111
	LS174T	105, 173, 175
	HcLo	322
15	C146	351
10	C168	184
	C170	302, 246
		·
	Breast Carcinoma	
	BT474.3	80
20	Bladder Carcinoma	
	T24	82, 95
	Ovarian Carcinoma	
	PA1	18, 10
25		

TABLE VI

Monoclonal Antibody Binding to Tumor Cells:
 Indirect Flow Cytometry Assay

Target Cell	Reagent	Fluorescence units/cell
Osteogenic Sarcoma		
791T		30.0
	NMIq	28.4
•	XMMCO-791	3380.0
	SV2372	20.0
	19G415	45.9
	B14B8	31.6
	194.2	35.2
	FX13D4	65.7
Colon Carcinoma		
LS174T		43.1
	NMIg	53.4
	XMMCO-791	209.1
	B14B8	1325.5
	FX13D4	957.0
	194.2	1212.9
C170		25.1
	NMIg	30.1
	XMMCO-791	302.2
	SV2372	27.9
	19G4.15	43.8
	B14B8	59.2
	161	36.2
	45.2D9 C4	30.3
HT29		41.4
	NMIg	47.0
	XMMCO-791	111.2
	161	252.8
	194.2	47.6
	FX13D4	56.0
HCT8	,	36.9
	NMIg	31.1
	XMMCO-791	335.2
,	161	128.4
1	194.2	37.3
1	FX13D4	926.4

## TABLE VI (Continued)

Target Cell	Reagent	Fluorescence units/cell
Bladder Carcinoma T24	NMIg XMMCO-791 161 194.2 FX13D4	41.4 47.0 82.0 81.6 44.6 60.0
Breast Carcinoma BT474.3	 NMIg XMMCO-791 B14B8 FXT3D4 194.2 161	70.4 76.5 196.5 271.2 87.9 253.9 281.4

Table VII summarizes tests on the complement mediated cytotoxicity of XMMCO-791 monoclonal antibody preparations. XMMCO-791 antibody was cytotoxic for osteogenic sarcoma derived cell lines 791T, 788T, 20S, and 278T, prostate carcinoma derived cell line EB33, and for HeLa cells, but not for ovarian carcinoma derived cell line PA1 or lung carcinoma A549 cells.

- C. Antibody Binding to Human Malignant Cells and Tissues
  - Radioimmunoassay of XMMCO-791 Binding to Tumor Membranes

Monoclonal antibody XMMCO-791 binding to membrane preparations derived from surgically removed tumors was determined using a solid phase radioimmunoassay.

Tumor membrane preparations (ENM) were made

by homogenizing fresh surgically removed tumor. Nuclei
and cell debris were removed by centrifugation (600 g)
and the ENM material sedimented at 105,000 g. ENM
preparations attached to polyvinylchloride microtiter
plates were used to assay antibody binding, this being

detected by uptake of 125 I-labeled rabbit anti-mouse
IGG F(ab')<sub>2</sub> (Brown A., et al., 1983) (Table VIII).
Positive tumor:nontumor ratios were obtained in 3/5
tumors.

#### 2. Flow Cytometry

25 Binding of monoclonal antibody XMMCO-791 to malignant cells derived from primary and metastatic human tumors has been determined by flow cytometry. 'For this purpose, tumor cells were brought into suspension by collagenase treatment, and reacted with either XMMCO-791 or with control murine monoclonal antibodies. Cell bound immunoglobulin was then detected with FITC-conjugated rabbit anti-mouse Ig

TABLE VII

#### Complement Dependent Cytotoxicity of XMMCO-791 Monoclonal Antibody

5	Cell <u>Line</u>	Cell Type	(Mean	tage Cytotox ± SD) Antibo n Concentrat (µg/ml)	dy at
	791T ·	Osteogenic sarcoma	125 62 ± 2 (1 ± 1)*	25 41 ± 2	5791T 12 ± 2
10	788T	Osteogenic sarcoma	43 ± 1 (1 ± 1)	25 ± 1 2	20 ± 2
	278T	Osteogenic sarcoma	50 ± 3 (1 ± 1)	12 ± 1	4 ± 1
	20S	Osteogenic sarcoma	32 ± 2 (1 ± 1)	1 ± 1	1 ± 1
15	EB33	Prostate carcinoma	41 ± 6 (1 ± 1)	4 ± 1	3 ± 1
	A549	Lung carcinoma	0 ± 1 (0 ± 0)	0 ± 0	0 ± 0
20	HeLa	Cervix carcinoma	45 ± 4 (1 ± 1)	28 ± 2	21 ± 2
	PA1	Ovarian carcinoma	0 ± 1 (1 ± 1)	0 ± 0	0 ± 1

<sup>25 \*</sup> Percentage cytotoxicity with heat inactivated complement.

#### TABLE VIII

#### Radioimmunoassay of Einding of XMMCO-791 to Colon Carcinoma and Normal Colon Membrane Preparations

5	Patient	XMMCO-791 antibody to membrane prepara		
		Colon Tumor (T)	Normal Colon (N)	T:N ratio
	109	842 ± 52	85 ± 41	9.9:1
	147	620 ± 48	307 ± 31	2.0:1
10	162	318 ± 11	242 ± 34	1.3:1
	167	2074 ± 71	286 ± 19	7.2:1
	170	386 ± 54	360 ± 51	1.0:1
		•		

Membrane bound 791T/36 detected by  $^{125}$ I-labeled rabbit F(ab')<sub>2</sub> anti-mouse IgG.

35

15

20

and analyzed by flow cytometry. The analysis was restricted to the size range of malignant cells by appropriate forward angle scatter gating (Durrant LG. et al., 1986a).

XMMCO-791 antibody reaction with tumor cells derived from a primary colon carcinoma and from liver 5 and lymph node metastases was tested. Significant binding of XMMCO-791 with tumor cells from both the primary and metastatic tumor was shown. For comparison, binding tests were carried out at the same time with two other murine monoclonal antibodies, C194 and C14 1 46; these MoAbs recognize CEA and Y hapten (Brown A., et al., 1983), respectively. Overall, the reaction with XMMCO-791 was comparable with that obtained with these antibodies.

The results of flow cytometry studies on
15 binding of XMMCO-791 MoAbs to freshly disaggregated
ovarian tumors are shown in Table VIIIa. The XMMCO-791
MoAb bound to the cell surface of all but one ovarian
tumor. Intensity of staining was weak (MLF<100) in one
tumor, moderate (MLFs 100-1000) in 8 and strong
20 (MLF>1000) in one.

### TABLE VIIIa

Flow Cytometric Analysis of Binding of 791T/36 to the Cell Surface of Freshly Disaggregated Overian Tumors

5	1	ndire				escen r Flu				umor Ce	lls	
		Ov1	Ov2	0v3	0v4	0v5	Ov6	0v9	Ov9	Ov10 (met)1	0v11	0v12
	Antibody 791T/36	138	61	105	138	135	105	249	456	94	155	1808
10	Normal mouse IgG	36	54	20	21	41	20	51	58	17	51	133

(1) Peritoneal metastases of primary tumor Ov9

## 3. <u>Characterization of XMMCO-791 Binding Antigen</u> in Human Primary Colon Carcinoma Tumors

As will be described later, studies carried out at University of Nottingham, U.K., with appropriate regulatory approval, demonstrated that the MoAb XMMCO-791, when injected in vivo, localizes in primary and metastatic human colon cancers. Thus, studies were carried out to identify the antigen to which the antibody is bound in vivo.

Briefly. 200 ug 131 I-XMMCO-791 containing 2

mCi <sup>131</sup>I was injected into patients with primary colon carcinomas, and 1-6 days later normal colon tissue and colon tumors were resected. Tissues were homogenized and the fibrous material was extracted. The extract was then mixed with Affi Gel 10 (BioRad Laboratories, Richmond, CA), to which affinity purified goat anti-mouse IgG antibody had been linked. The pellets contained the bound <sup>131</sup>I-labeled material from the tissue extract. This was reacted with <sup>125</sup>I to label tissue protein.

After washing, the Affi Gel pellet was

20 treated with sodium isothiocyanate to release bound

131 I-labeled XMMCO-791 antibody, either free or
complexed with antigen.

After purification by gel chromatography, the extract was incubated with Sepharose-Protein A to
25 isolate Ig containing material. These products were removed from the gel and
SDS-Polyacrylamide-Gel-Electrophoresis (SDS-PAGE) was carried out. The results are summarized in Table IX.

The apparent molecular weights of two of the

30 bands at 60 kD and 25 kD corresponded to those for
heavy and light chains of the XMMCO-791 IgG2b antibody.
The third band at 72 kD corresponded to that of the
XMMCO-791-defined antigen isolated from 791T cells.
The conclusion from the studies is that following

35 infusion of XMMCO-791 antibody into colorectal

carcinoma patients, the antibody localizes within the tumor by binding to tumor-associated antigen of molecular weight (72 kD) identical to that found on 791T cells, the original immunogen.

#### TABLE IX

# Localization of <sup>191</sup>I-Labeled XMMCO-791 Monoclonal Antibody in Primary Human Colorectal Carcinoma

5	Clinical Data	Patient 1	Patient 2	Patient 3
	Tumor Type:	Rectal adenocar- cinoma	Caecum adenocar- cinoma	Sigmoid adenocar- cinoma
10	Duke's Stage:	В	В	С
	Degree of Differentation:	moderate	well	moderate
	Tumor size (mm)	30 x 20	35 x 35	85 x 60
15	Patient Infused with:	131 + 125 XMMCO-791 + 125 I-IgG <sub>2b</sub>	131 <sub>I</sub> -XMMCO-791	131 <sub>I-XMMCO-791</sub>
	Period Between Antibody Infusion and Tumor resection (days):	1	3	3
20	Distribution of radioactivity of dose of 13 I-XMMCO- 791 per g of tumor tissue:	0.008	0.003	0.004
25	Tumor:Normal Tissue Ratio:	3.3:1(131 1.2:1(125 I)	2.0:1( <sup>131</sup> I)	1.8:1( <sup>131</sup> I)
	Radioactivity (131 I Recovered in Fibrou Material from tumor tissue:	s	83	74
30				

#### D. Antibody Binding to Normal Human Cells

Reactivity of XMMCO-791 Monoclonal Antibody
 with Human Peripheral Blood Mononuclear Cells
 (PBMC) Analyzed by Flow Cytometry

#### a. Lymphocytes

Using direct and indirect immunofluorescence assays, XMMCO-791 antibody was shown to react strongly with phytohemagglutin (PHA) (Sigma) stimulated lymphoctyes from peripheral blood and negligibly with resting lymphocytes. Maximum binding was observed after 3 days culture with PHA (5 µg/ml), coinciding with maximum DNA synthesis. Comparable results were obtained using concanavalin A (Con A) (10 µg/ml) as mitogen (Table X).

XMMCO-791 antibody precipitated a protein of apparent molecular weight of 72,000 from cells cultured 15 3 days with PHA. No other bands at 72,000 were precipitated from other cultures of PBMC and no 72,000 molecular weight material was precipitated from PHA-stimulated PBMC using normal mouse immunoglobulin, rather than XMMCO-791 antibody.

#### b. Blood Granulocytes

Binding of XMMCO-791 to peripheral blood granulocytes has been determined using an indirect flow cytometry assay.

Table XI summarizes a series of tests of 9

25 lots of XMMCO-791 before and after ultracentrifugation with blood granulocytes from 2 donors. The binding of XMMCO-791 to granulocytes was compared with that of 'supernatant made by the parental myeloma line, P3/NSI/1-Ag4-1. 8/9 lots showed negative binding. One 
30 lot showed moderate binding which became negative after centrifugation.

#### TABLE X

Binding of FITC-labeled XMMCO-791 Antibody to Mitogen-Stimulated PBMN Cells as Assessed by Quantitative Flow Cytofluorimetry

5	Cell Subpopulation Analyzed	Percentage of cells in subpopulation analyzed (mean ±SD)	Number of FITC-XMMCO- 791 antibody molecules binding/cell (x 10 ) (mean ± SD)
10			
	Small lymphocytes from non-stimulated PBMN cell preparations	93.4 + 3.8 (n = 18)	<0.1 (n = 18)
	Lymphoblasts from PBMN		
15	cell preparations cultured with PHA for 3 days	45.5 ± 22.2 (n = 17)	$1.1 \pm 0.4$ (n = 17)
	Lymphoblasts from PBMN		
	cell preparations cultured with Con A for 3 days	$60.6 \pm 12.0$ $(n = 6)$	$0.9 \pm 0.5$ (n = 6)
20		,	

The number of determinations (n) is given in parenthesis

TABLE XI

Monoclonal Antibody XMMCO-791 Binding to Blood Granulocytes. Indirect FACS Analysis Before and After Centrifugation

5	<u>No.</u>	Sample	Mean Fluo Dono		ntensity/C	
			Before	After* .	Before	After
	1	3929	83.9	27.7	67.0	28.6
	2 .	4110	24.2	24.7	21.4	25.4
10	3	3619	34.8	35.8	34.9	32.1
	4	4086	25.0	22.5	31.1	29.1
	5	4056	24.1	25.1	25.4	31.1
	6	3984	27.6	25.1	45.2	32.3
15	7	50108	25.1	22.7	28.9	28.6
	8	4110			28.6	28.5
	9	P3NS1	19.8		19.2	

\* Ultracentrifuged 105,000g/60 minutes

# E. <u>Binding to Other Normal Human Tissues Measured By</u> Immunoperoxidse

XMMCO-791 was extensively evaluated for crossreactivity with normal tissues using the indirect immunoperoxidase conjugate technique. As a control, tissues were simultaneously tested with a purified 5 murine MoAb in the same concentration. The control immunoglobulins used for these purposes were an IgG2 mouse myeloma protein (UPC 10, Litton Bionetics, Kensington, MD) or a MoAb with reactivity to sheep red blood cells (SRBC).

Fresh tissue slices (2-3mm thickness and up to 2.0 cm in width) was generously coated with Optimal Cutting Temperature Compound (OCT), (Ames Co., Elkhar, Indiana) and wrapped in aluminum foil. The specimen was "snap" frozen in liquid nitrogen-cooled isopentane (2-methylbutane, VWR, Norwald, CA) at controlled temperature (-120 to -150°C) for 10-15 seconds. The tissue was kept frozen for long-term storage at -70°C, or for short-term storage at -20°C, in a tightly sealed container to prevent evaporation and drying of tissues.

Frozen tissues were allowed to equilibrate slowly overnight by placing in a -35°C cryostat prior to cutting the frozen sections. Cut sections were dried overnight at room temperature prior to staining.

A circle was etched on each slide around the tissue using a diamond pencil. Slides were then fixed in acetone for 1 minute, followed by a 10 minute PBS wash. Excess fluid was removed and the primary antibody applied for one hour while making sure that

30 followed by a 10 minute PBS wash.

Excess fluid was removed and peroxidase-conjugated goat anti-mouse IgG (Tago/product code 6450) (diluted 1:10 in PBS) applied for 30 minutes, followed by a 10 minute PBS wash.

the tissue was covered and not allowed to dry out.

10

15

20

The slides were developed in aminoethylcarbazole (AEC), (0.5 ml AEC stock 120 mg AEC in 15 ml dimethylformamide), 9.5 ml acetate buffer (79 ml of 0.1 M sodium acetate, 21 ml of 0.1 N acetic acid), and 0.05 ml  $3\%~\rm H_2O_2$ ) for 5 minutes, followed by a 5 minute  $\rm H_2O$  wash. The slides were then counterstained with fresh Mayer's Hemtoxylin for 5 minutes, followed by a 5 minute wash in running tap water and coverslipped with glycerine mounting media. The following is a summary of the results:

- 10 Throughout the study, connective tissue (ground substance) was positive.
  - The vascular endothelium of capillaries and venules in varying tissues were mildly positive but not all venules were positive in any tissue.
- 15 Lung tissue from 2/4 autopsy specimens showed some reactivity with about 10% of the alveolar epithelium/macrophages in each of the two specimens; most reactivity was in macrophages.
- Kidney tissue showed faint glomeruli staining in
   10% of the sample in 1/4 autopsy specimens.
  - Skin showed staining in the lumen of ducts in 2/4 autopsy specimens.
  - Colon showed slight staining of glandular epithelium in both colon specimens tested.
- 25 Fetal tissue showed some staining in alveolar and bronchial epithelium of the lung; some positive tubule lumen in the kidney.
  - There was no staining (except for connective tissue and venules) in:

Heart Liver Thyroid Muscle Adrenal Breast Thymus Nerve Spinal cord Diaphragm Uterus Testes Pancreas Aorta Esophagus Brain Spleen

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Note: Granulocytes will appear positive in both control and test tissue because of endogenous perxidase.

# 10 F. Identification of the Cell Antigen Binding XMMCO-791

1. Osteogenic Sarcoma Derived 791T Cells
791T cells were surface-labeled with 125 I by
lactoperoxidase catalyzed radioiodination and lysed. A
15 lysate containing 125 I-labeled membrane protein was
obtained. Sodium dodecyl sulfate (SDS) and XMMCO-791
MoAb were added to aliquots of this cell lysate, followed by Sepharose-Protein A beads. The beads were
washed and final pellets were suspended in reducing gel
20 sample buffer. After incubation, supernatants were
anlayzed by polyacrylamide gel electrophoresis. Gels
were stained for protein with Coomassie blue and, after
drying, autoradiographed.

The antigen precipitated by the MoAb

25 XMMCO-791 from detergent lysates of 125 I-labeled 791T cells migrated in SDS-PAGE slab gels with an apparent molecular weight of 72,000. Both reduced and non-reduced samples gave equivalent results, indicating that the antigen is a monomeric cell surface protein.
30 The relatively broad band suggests that the antigen may be glycosylated, with microheterogeneity in the saccharide residues producing the wide band. When immunoprecipitates were treated with neuraminidase, the apparent molecular weight was reduced to 55,000, indicative of extensive glycosylation. Since

microheterogeneity in the band of precipitated material was lost following neuraminidase treatment, this indicated that microheterogeneity was attributable to variations in sialic acid content.

That the gp72 antigen is glycosylated was confirmed by labeling growing tumor cells with <sup>3</sup>H 5 glucosamine and again precipitating a 72,000 molecular weight antigen which was radiolabeled.

#### 2. Other Human Tumor Cell Lines

Seven cell lines known to express the antigen recognized by XMMCO-791 were selected. Four of these were osteogenic sarcomas, two were colon carcinomas, and one was a prostate carcinoma cell line. Negative controls included lung carcinoma, breast carcinoma, and malignant melanoma cell lines.

These 10 human tumor cell lines were surface-labeled with 125I. lysed with detergent and sub-15 jected to radioimmunoprecipitation using either the XMMCO-791 monoclonal antibody or normal mouse immunoglobulin. The immune precipitates were isolated using Sepharose-Protein A and analyzed by SDS-PAGE and 20 autoradiography. The XMMCO-791 antibody precipitated a protein from 791T cells of apparent molecular weight of 72,000 in accordance with previous findings. Five other cell lines contained protein material of apparent molecular weight of about 72,000 that was also precip-25 itated by the XMMCO-791 antibody. Colon carcinoma cell line HT29 gave anomalous results, since despite repeated testing, no protein was precipitable with the ' XMMCO-791 antibody. The cell lines A549, B55, and RPMI 1566, which are unreactive with the XMMCO-791 antibody. 30 failed to express a 72,000 dalton antigen in these immunoprecipitation studies.

It is evident from these studies that the precipitates from the other cell lines which bound XMMCO-791 MoAb were not identical to that from the 791T cell line, although proteins of 72,000 daltons were

detected in each case. These differences may be due to antigen heterogeneity (characteristic of carbohvdrate-rich glycoprotein antigens) and/or variations in the specific activity of the antigens with respect to radiolabeling. The cell line EB33 clearly showed two distinguishable components of 72,000 and 55,000 daltons that were precipitated by the XMMCO-791 antibody.

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# Effect of Neuraminidase Treatment

Neuraminidase reduced the apparent molecular weight of the precipitate antigens in five of the six cell lines tested to a uniform value of 55,000 daltons. These results indicate, first, that the precipitated labeled protein antigens are glycosylated and, second. that their molecular heterogeneity is attributable to differences in sialic acid content. The protein precipitated from the colon carcinoma cell line HcLo was 15 apparently not affected by treatment with neuraminidase.

## Effect of Chymotrypsin Treatment

Radiolabeled immune precipitates were treated with chymotrypsin and analyzed by SDS-PAGE and autoradiography to compare the XMMCO-791 defined anti-20 gens with respect to their susceptibility to proteolysis. The XMMCO-791-defined antigen proved to be very resistant to degradation, the major chymotryptic product in each case being a polypeptide with an apparent molecular weight of 47,000. 25 would indicate that each of the antigens immunoprecipitated with the XMMCO-791 antibody have at least one chymotryptic site in common. The major 47.000 molecular weight polypeptides from the six tumor cell lines examined did not display the molecular het-30 erogeneity associated with the non-enzyme-treated XMMCO-791-defined antigens. This would imply that the portion(s) of the molecule exhibiting a variable content of sialic acids was (were) removed by proteolysis with chymotrypsin. It may be noted that the antigen 35

from the cell line HcLo was not anomalous with respect to its susceptibility to chymotrypsin. This contrasts with its apparent resistance to neuraminidase since the major polypeptide generated was of 47,000 dalton molecular weight.

#### Effect of Papain on the gp72 antigen з.

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Previous studies have demonstrated that 791T cells treated with papain no longer bind XMMCO-791 antibody, indicative of the degradation or release of XMMCO-791-defined antigen. To define the action of papain more precisely, 791T cells were radiolabeled with 125 I and treated with papain. After centrifugation, the solubilized extract of cell membrane proteins and glycoproteins was subjected to radioimmunoprecipitation using XMMCO-791 antibody and Sepharose-Protein A. and the immune precipitates were analyzed by SDS-PAGE and autoradiography. The results 15 indicate that papain digestion released an antigenically active protein fragment of apparent molecular weight of 53,000. Neuraminidase treatment of the immune precipitate prepared as above effected a further reduction in apparent molecular weight to 50,000, indicating that this papain fragment was glycosylated and carried sialic acid residues.

Purification of the 125 I Labeled gp72 Antigen To develop a purification procedure for the 25 gp72 antigen, 791T cells were surface labeled with  $^{125}I$ and lysed with detergent. After centrifugation and dialysis, the soluble extract was fractionated by immunoadsorbent chromatography by passage through two non-specific adsorbent columns (Sepharose 4B and Affi Gel 10-linked mouse IgG) and a specific immunoadsorbent column (Affi Gel 10-linked XMMCO-791 monoclonal antibody) connected in series. The XMMCO-791 antibody immunoadsorbent was eluted and rechromatographed.

The purified antigen consisted of a major band at 72,000 daltons. There was also a minor band of 35

slightly lower molecular weight; it may be due to carbohydrate heterogeneity.

Binding of 125 I-Labeled qp72 to Lectins The binding of 125 I-labeled XMMCO-791-defined antigen to lectins was investigated. After incubation of aliquots of the antigen preparation (1  $\times$  10<sup>4</sup> cpm) 5 with Sepharose-wheat germ agglutinin (WGA). Sepharose-Con A and Sepharose-lentil lectin, bound glycoproteins were eluted and analyzed by SDS-PAGE and autoradiography. The material eluted from Sepharose-WGA migrated with an apparent molecular 10 weight of 72,000, indicating the presence of N-acetyl-glucosamine in this glycoprotein. Equivalent material was also bound to Sepharose-Con A, but no bands were seen with eluates from Sepharose-lentil lectin or Sepharose alone. Of the radioactivity recovered in the eluates from these columns, 69% was present in the fraction bound and eluted from Sepharose-WGA, 49% was bound and eluted from Sepharose-Con A, 23% from Sepharose-lentil lectin and 9% from Sepharose alone.

#### Conclusions

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XMMCO-791 MoAb reacts with the osteogenic sarcoma cell line 791T used for initial immunization. The XMMCO-791-defined epitope on this cell line is expressed on a protein of apparent molecular weight 25 72,000. The MoAb also reacts with cell lines other than this one. An investigation was performed to determine whether the epitope occurred on similar molecules on these other cell lines. It was concluded that molecules expressing this epitope do exist on other These molecules are glycoproteins 30 tumor cell lines. that have different molecular weights. This difference is attributable to varying degrees of sialyation. There are no apparent differences in the polypeptide "backbone" of these antigenic molecules. Radiolabeled immunoprecipitates, prepared with the XMMCO-791 35

antibody, from three osteogenic sarcoma cell lines (2 OS, 788T, and 278T), the prostate carcinoma EB33 and the colon carcinoma HcLo each contained a protein with a molecular weight of 72,000 as the major constituent and, in some cases, material of lower weight. neuraminidase treatment of the immune precipitates. 5 this heterogeneity was shown to be due to variations in sialic acid content of the antigens since; in five of the six cell lines tested, such treatment produced homodeneous material of apparent molecular weight 55,000. Chymotrypsin treatment of the immune precipitates 10 produced in each instance a major polypeptide of molecular weight 47,000 which displayed no microheterogeneity. Immunoadsorbent-purified antigen from 791T cells was shown to bind strongly to Sepharose-concanavalin A. confirming the glycoprotein nature of this antigen. These results are summarized in Table XII.

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REACTIVITY OF THE MONOCLONAL ANTIBODY XMMCO-791

Apparent molecular

Antibody reactivity

Target Cell	with viable target cells:		weight (x 10 <sup>-3</sup> ) of target antigen (SDS-PAGE)		
	Cell binding activ-	Antibody molecules bound per cell , a	Before neuramin- idase	After neuramin- idase	
	ity*	cell (x 10 <sup>-4</sup> ) <sup>2</sup>		0.00.	
Osteogenic					
Sarcomas:					
79 <b>1T</b>	+++	220	72	55	
788T	+++	160	72	55	
2.78T	++	51	72	55	
205	+	53	72	55	
Carcinomas:					
HcLo			70	70	
(colon) HT29	+++	ND	72	72	
(colon) EB33	++	ND	No precipitate	NR	
(prostate) A549	+++	35	72;55	55	
(lung) B55		ND	No precipitate	NR .	
(breast)		ND	No precipitate	NR	
Melanoma:					
RPM1					
1566		<2	No precipitate	NR	

Cell-binding of XMMCO-791 antibody was determined using the indirect <sup>12</sup>I-Protein A binding assay (Embleton MJ, et al, 1981). +++ represents binding ratios >10. ++ represents binding ratios of 5-10. + represents binding ratios of 2-5 and --- represents binding ratios <2 where binding ratio = (mean cpm bound to cells treated with XMMCO-791 antibody)/(mean cpm bound to cells treated with PSNS1 spent medium).

ND, not determined

35 NR, not relevant

<sup>30 -2</sup>Quantitative binding of <sup>125</sup>I-labeled XMMCO-791 antibody determined by Frice MR, et al. (1982a).

<sup>-3 (</sup>Price MR, et al, 1983b)

#### G. Biological Properties of XMMCO-791

- 1. Complement Dependent Cytotoxicity
  Complement dependent cytotoxicity of
  monoclonal antibody XMMCO-791 was assayed in a 2 hour
  51Chromium release assay. It was found that only rabbit serum served as an effective complement source for
  5 lysis of target cells (Table XIII).

Experiments were carried out to determine whether XMMCO-791 mediated ADCC reactions (Flannery et 10 al., Eur. J. Cancer Clin. Oncol. (1984) 20:791-98).

51 Cr-labeled target cells (791T, and the human erythroleukemic cell line K562) were incubated with appropriate dilutions of antibody and aliquoted into microtiter wells. Appropriate numbers of human 15 mononuclear cells were added.

XMMCO-791 is not able to mediate ADCC against either 791T cells or K562 cells at concentrations of antibody ranging from 10 to 0.1  $\mu$ g/ml and with effector:target cell ratios ranging from 0.8:1 to 3:1.

20 3. In Vivo Inhibition of Tumor Growth

The effect of XMMCO-791 monoclonal antibody
alone on the in vivo growth of human tumors was assessed using xenograft systems. 791T cells were implanted subcutaneously into mice immunodeprived by
25 thymectomy and whole body irradiation. Mice were
treated with XMMCO-791 antibody starting 1 to 5 days
after 791T implantation and were treated at intervals

Three injections of either 40  $\mu g$  or 80  $\mu g$  did 30 not modify growth of 791T xenografts. In further tests, doses of up to 181  $\mu g/kg$  body weight (given in 9 divided doses) have not suppressed growth of 791T xenografts.

thereafter.

Complement-Dependent Cytotoxicity of Anti-791T Monoclonal Antibody XPMCO-791 Screen of Complement Sources

% Cytotoxicity Against

Serum	791T/Cells Treated With	eated With		РНА-	PHA-Blasts Treated With	Vith
Source of Complement*	Medium	XMMC0-791	Anti-791T/48+ W6/32++	W6/32++	Medium	W6/32++
Rabbit	$-0.3 \pm 0.3$ (-0.2 ± 0.1)	$53.8 \pm 4.7$ (0.7 ± 0.5)	$29.1 \pm 2.8$ (0.4 ± 0.6)	46.1 ± 5.3 (0.9 ± 0.5)	$8.4 \pm 0.8$ (-0.4 ± 0.6)	62.3 ± 3.5 (0.0 ± 0.2
Mouse	$0.3 \pm 0.2$ (0.2 ± 0.3)	$0.0 \pm 0.2$ (-0.1 ± 0.2)	$0.0 \pm 0.1$ (0.3 ± 0.2)	$0.0 \pm 0.3$ (0.1 ± 0.1)	0.2 ± 0.7 (-0.8 ± 0.7)	$0.4 \pm 1.2$ (0.3 $\pm$ 0.4
Human Pool	0.0 ± 0.2 (-0.1 ± 0.2)	$0.1 \pm 0.1$ (0.5 ± 0.3)	$0.1 \pm 0.1$ (0.3 ± 0.2)	$-0.3 \pm 0.2$ (-0.3 ± 0.2)	2.1 ± 0.6 (-0.3 ± 1.0)	76.3 ± 0.9 (0.6 ± 0.9
Human (1)	$0.0 \pm 0.4$ (0.0 ± 0.3)	$0.1 \pm 0.2$ (0.4 ± 0.3)	$0.4 \pm 0.5$ (0.7 ± 0.6)	$0.0 \pm 0.4$ (0.1 ± 0.1)	$0.6 \pm 0.7$ (0.4 ± 0.3)	67.6 ± 5.5 (0.6 ± 0.6
Human (2)	$0.2 \pm 0.5$ (0.3 ± 0.2)	$0.2 \pm 0.1$ (-0.2 ± 0.3)	$0.3 \pm 0.2$ (0.1 ± 0.4)	$-0.5 \pm 0.2$ (-0.6 ± 0.3)	1.0 ± 1.1 (-0.3 ± 0.7)	$66.4 \pm 7.2$ (1.2 ± 1.2
Human (3)	$-0.3 \pm 0.1$ (-0.1 ± 0.2)	$0.1 \pm 0.3$ (0.6 ± 0.2)	$0.4 \pm 0.2$ (1.0 ± 0.3)	$-0.4 \pm 0.3$ (-0.8 ± 0.2)	$1.0 \pm 1.0$ (-0.6 ± 0.9)	$74.8 \pm 4.8$ (0.7 ± 1.3
Guinea-pig	$0.3 \pm 0.5$ (0.0 ± 0.5)	$0.1 \pm 0.3$ (-0.1 ± 0.2)	$0.2 \pm 0.2$ (0.1 ± 0.2)	$0.5 \pm 0.2$ (0.5 ± 0.1)	$1.1 \pm 0.4$ (-0.1 ± 0.3)	$40.7 \pm 4.7$ (0.1 ± 0.7

<sup>\*</sup> Final dilution of serum ---1/5.

<sup>+</sup> XMMCO-791 and anti-791T/48 monoclonal antibodies were tested at a final concentration of 125 µ/ml.

Figures in parenthesis represent % cytotoxicities determined in the presence of heat-inactivated complement. ++ W6/32 monoclonal antibody was tested at a final dilution of 1/500 of the serum/ascites fluid.

## H. Conjugation of XMMCO-791 With Ricin Toxin A Chain (RTA)

The conjugation of RTA to an immunoglobulin has been thoroughly described in United States Patent No. 4,590,071, the disclosures of which are hereby incorporated by reference. U.S. Patent No. 4,590,071 fully discloses the technique for RTA purification employing anti-ricin B chain antibodies as well as the conjugation methodology.

#### I. Characterization of the Immunotoxin

XMMCO-791-RTA was characterized biochemically
10 by SDS-PAGE and functionally by flow cytometry measurement of binding to colorectal carcinoma derived C170
cells and to control MOLT-4 cells (A.T.C.C. Accession
No. CRL 1582). It was also characterized by assays
that either measured its ability to inhibit protein
15 synthesis in a cell-free system or to kill 791T cells.

In order to determine lot to lot variation, three replicate research lots of immunotoxin were made from the same lot of XMMCO-791 and the same lot of RTA. The conjugations and purifications were done separately but simultaneously. These lots, 51016 A, B, and C, are compared within each section to show lot to lot variation and preliminary data on stability. They have been analyzed by SDS-PAGE, flow cytometry, reticulocyte lysate and whole cell cytotoxicity assays at various times after preparation. The data indicate that the lot to lot variation is minimal, and that the immunotoxins are stable for a least three months.

Results from the assays on a production lot of immunotoxin are also presented in each section.

Research lots are prepared in small quantities, whereas production lots are prepared in larger batches under aseptic clean room conditions. The conjugation procedure is the same, but scale up production often produces an increased degree of conjugation. This can be decreased by adjustment of the N-succinimidyl

Unique very similar, both functionally and biochemically.

#### 1. SDS-PAGE Analysis

#### a. The Assay

SDS-PAGE analysis of immunotoxins run under nonreducing conditions provides information about the amount of free (unconjugated) antibody remaining in the preparation, the mean RTA/MoAb ratio, the presence of unbound RTA in the preparation, and the number of molecular species present. Two gel analyses are run on each immunotoxin preparation. A 10% nonreduced SDS-PAGE was run to determine the presence of free RTA, producing poor discrimination between the free antibody and the RTA-MoAb conjugates that tend to cluster near the top of the gel. However, it allows excellent definition of any free RTA, which when present is seen as two bands at 30 kD and 33 kD. Free RTA generally constitutes less than 5% of the total protein in freshly prepared conjugate and RTA bands are rarely seen.

A nonreduced SDS-PAGE was run in a 3 -7.5% gradient. This allows accurate detection of the molecular species of conjugate present. Free antibody appears as a band at approximately 160 kD, and immunotoxins with 1, 2, 3 or more RTAs per MoAb appear at appropriate locations reflecting their increased molecular weight.

#### b. Results

SDS-PAGE analyses were performed on the three replicate research lots of XMMCO-791-RTA and on one of the production lots within two weeks of immunotoxin preparation. The amount of free antibody is similar within the replicate lots, ranging from 1 to 2%. This is typical of free antibody values seen in other research lots. Table XIV summarizes the biochemical characteristics of the replicate and production lots. The RTA to IgG ratio ranged from 3.0

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TABLE XIV

# Percent of Components in Small or Large Lots of Immunotoxin

	<u>51203</u> 1	<u>51016A</u> 2	<u>51016B</u> 2	51016C <sup>2</sup>
5 Free RTA Free MoAB Monomer Dimer Trimer Tetramer Pentamer Hexamer RTA: MoAb ratio	0 0 4% 18% 32% 46%  4.2	5.3% 1.1% 12 25 30 21 8% 3% 3.0	5.6% 2.1% 10 21 27 23 12 5	4.4% 2.2% 10 10 29 26 16 7

Production lot, yield 1000 mg

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Replicate lots, yield approximately 20 mg

to 3.4 on the replicate lots. Molecular species corresponding to free MoAb or 1-6 RTA/MoAb were seen; this was similar for all research lots. By nonreduced 10% SDS-PAGE, about 5% free RTA was detected.

The production lot, 51203, was used for stability testing, and the results of these tests at 5 one and two months are shown in Table XV, indicating that the product is stable. Four molecular species were detected on nonreduced gradient gels, corresponding to dimers, trimers, tetramers and pentamers. There was no free antibody and no band corresponding to 10 monomers. Nonreduced 10% gels showed that minimal free RTA was present.

#### c. Summary

Both research and production lots showed little free RTA when freshly prepared. The research lots had up to 1-3% free antibody and molecular species corresponding to 1-6 RTA/MoAb, whereas the production lot had no detectable free antibody and no detectable monomers. Molecular species of up to five RTA/MoAb were present in the production lot. Little deterioration was noted over 3 months.

 Flow Cytometry Studies, XMMCO-791-RTA Binding to C170 Cell Line

#### a. The Assay

The competitive inhibition assay, by which
25 flow cytometry is utilized to determine binding of unlabeled XMMCO-791 to C170 colon carcinoma cells, is
known to those skilled in the art. This assay is particularly well-suited to assess retention of antibody
binding in

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TABLE V-6

# Change in Composition of Replicate Lots of XMMCO-791-RTA With Time

		5101	51016 A		51016 B		51016 C	
5		Initial	3 mo	Initial	3 mo	Initial	3 mo	
	Free RTA	5.3	2.9	5.6	3.7	4.4	2.6	
	Free MoAB	1.1	4.3	2.1	3.3	2.2	1.8	
10	Monomer	12	18	10	15	10	13	
	Dimer	25	28	21	26	10	27	
	Trimer	30	27	27	31	29	27	
15	Tetramer	21	23	23	25	26	31	
	Pentamer	. 8	0	12	• 0	16	0	
	Hexamers	3	0	5	0	7	0	
	RTA:MoAb Ratio	3.0	2.5	3.2	2.6	3.4	2.7	

drug antibody conjugates such as immunotoxins because it measures the ability of unlabeled antibody to specifically compete with FITC-labeled homologous antibody for antigen binding sites.

The reference curve was generated by mixing unlabeled XMMCO-791 standard with FITC-XMMCO-791 and 5 reacting it with C170 cells. This was the positive control. Negative controls included an unlabeled antibody that does not bind to C170 and thus cannot compete. The slope of this line is zero.

The immunotoxin was evaluated by comparing it 10 with its "parent lot" - the MoAb from the same lot used for RTA conjugation. Thus, two sets of mixtures were prepared, the first being a mixture of MoAb from the immunotoxin parent lot with the standard FITC-MoAb and the second. a mixture of the immunotoxin with the FITC-MoAb. When the mixtures were added to C170 cells 15 and assessed for fluorescence intensity by flow cytometry, two lines were generated. Comparison of the slope of the line generated by the parent MoAb with that of the immunotoxin describes the degree of activi-20 ty retained by the immunotoxin. Since the assay is highly concentration dependent, it was necessary to correct the concentration of the immunotoxin so that is was expressed in terms of antibody concentration instead of immunotoxin concentration.

#### b. Results

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Both the replicate lots had RTA to MoAb ratios of 3-3.4 RTA:MoAb; the more highly conjugated production lot had 4.2. The lots tested for binding at various times after conjugation. The results are shown in Table XVI, and are expressed either as amount of unlabeled antibody necessary to decrease fluorescence by 50% (IF $_{50}$ ) or as percent decrease in line slope. By the latter parameter, it can be seen that there was little difference in the replicate lots, all of which bound about 80% of their parent lot. Moreover, there

was little noticeable deterioration, and testing three months after production still revealed binding that was greater than 80% of the parent lot. Table XVI also shows the percent binding of the production lot 51203, which had a higher RTA: MoAb ratio than the smaller lots and bound 48% of the parent lot. There was no decrease in binding two months after conjugation.

#### c. Summary

Replicate lots made under the same conditions showed uniform binding and little loss of activity compared to unconjugated parent lot. There was no apparent decrease in binding over a three-month period. This demonstrates that RTA:MoAb ratios of 3:1 produce little loss in activity.

The first production lot had an RTA:MOAb ratio of 4.2:1 and decreased binding to about 50% of the unconjugated parent lot. Although this had little effect on either the whole cell cytotoxicity assay, the xenograft therapy trials, or the toxicity, we feel that this represents the upper limit of desirable conjugation. In spite of the higher degree of conjugation, there was no apparent decrease in binding over a two-month period.

TABLE XVI

Binding by Flow Cytometry of Lots of XMMCO-791-RTA Assayed at Various Times After Conjugation

Lot	Time After Conjugation	IF <sub>50</sub> test IF <sub>50</sub> Parent	Ratio of Test Slope To Parent Slope
51016A	2 Weeks 1 Month 2 Month 3 Month	- 77% 82% 79%	79.8% 89.1% 83.9%
	3 Month		
В	2 Weeks 1 Month 2 Month 3 Month	- 79% 88% 80%	81.9% 95.3% 88.3%
С	2 Weeks 1 Month 2 Month 3 Month	80% 81% 77%	84.0% 86.3% 83.0%
51203	2 Weeks 1 Month	45% 50%	47.7% 52.2%
2			

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## 3. Reticulocyte Lysate Assay

#### a. The Assay

This assay measured the ability of XMMCO-791-RTA to inhibit protein synthesis in a cell free system, and compared it with the inhibition producted by free RTA. Although both bound and free RTA should theoretically produce the same amount of inhibition, there is usually a slight loss of activity in the conjugate when the two compounds are compared on the basis of RTA molarity.

Rabbit reticulocyte lysate is prepared by

10 lysing rabbit reticulocytes (precursor red blood cells)
in water. A nutrient solution is prepared consisting
of standard preparations of all amino acids (except
leucine), 14C-leucine, salts, EDTA, hemin (enzyme
co-factor), and creatine phosphokinase (the enzyme

15 which catalyzes translation). This solution contains
all materials necessary for protein synthesis.

Dilutions of RTA or RTA-containing products were added to types containing the nutrient solution and the lysate. The incorporation of <sup>14</sup>C-leucine into protein by the lysate was measured to determine the degree of inhibition of protein synthesis. Results are expressed as a percentage compared to non-RTA containing tubes (100% reference).

Values are expressed as gm/ml producing 50% 25 inhibition of protein synthesis (IC<sub>50</sub>). The assay may vary by ± 2.5 fold in replicate analysis.

#### b. Results

Table XVII shows assays on the three replicate immunotoxin lots and one production lot. When 30 plotted in terms of gm/ml, the  $\rm IC_{50}$  values of the replicate lots ranged between 2.55 and 3.8 x  $\rm 10^{-9}$ . Free RTA gave an  $\rm IC_{50}$  of about 3 x  $\rm 10^{-10}$  gm/ml. Within the limits of the assay, the lots with RTA:MoAb conjugation ratios of 3-3.4 gave the same  $\rm IC_{50}$  values. The  $\rm IC_{50}$  of

the lot with the higher RTA:MoAb conjugation ratio was lower, although still within the range of five fold.

In order to determine if RTA activity was lost after conjugation to MoAb, these same values were expressed in terms of equivalent RTA molarity. Some loss of RTA activity with conjugation was seen in the lots with RTA:MoAb ration of 3, and more loss was noted in the lot with a RTA:MoAb ratio of 4. Other immunotoxins tested show no loss of RTA activity at conjugation ratios of 3.0. This suggest that the conjugated RTA remains biochemically active, but with higher conjugation there is steric hindrance of its activity.

#### c. Summary

The RLA assay demonstrates that little loss in activity of RTA is seen after conjugation. Since the production lot of immunotoxin had a higher conjugation ratio than the research lots, the IC<sub>50</sub> in terms of gm/ml was different. When expressed in terms of RTA molarity, however, the values are similar, although the lots with lower conjugation ratios have higher relative activity.

TABLE XVII

## Reticulocyte Lysate Assay: IC<sub>50</sub> of Several Lots of XMMCO-791-RTA

				Equivalent	RTA Molarity
5	Lot#	RTA: IgG Ratio	Immunotoxin (gm/ml IC <sub>50</sub> )	Immunotoxin*	RTA Standard IC <sub>50</sub>
	51016A	3.0	$3.85 \times 10^{-9}$	51 p <u>M</u>	5 р <u>м</u>
	51016B	3.2	$2.55 \times 10^{-9}$	35 p <u>M</u>	5 р <u>м</u>
10	51016C	3.4	2.8 x 10 <sup>-9</sup>	41 p <u>M</u>	5 p <u>m</u>
	51203	4.2	1.5 x 10 <sup>-8</sup>	134 p <u>M</u>	8.1 p <u>M</u>

\* Calculated by multiplying the molarity of immunotoxin IC<sub>50</sub> by the number of RTA moieties per MoAb; e.g., Lot 51016A has an IC<sub>50</sub> of 11 pM and three RTA moieties/MoAb. Thus the equivalent RTA molarity is 51 pM.

The three replicate lots were reanalyzed three months after preparation and the results are shown in the following Table. Little loss of RTA activity is seen.

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## TABLE XVIII

# Time after Production IC<sub>50</sub> gm/ml

		2 Weeks	3 Months
_	51016A	3.8 x 10 <sup>-9</sup>	3.3 x 10 <sup>-9</sup>
5	51016B	$2.55 \times 10^{-9}$	3 x 10 <sup>-9</sup>
	51016C	$2.8 \times 10^{-9}$	5.8 x 10 <sup>-9</sup>

### 4. Whole Cell Cytotoxicity Assay

#### a. The Assav

This assay uses 791T as a positive cell line and MOLT-4 (A.T.C.C. Accession No. CRL 1582) as a negative cell line. It was designed to assess the ability of XMMCO-791-RTA to specifically kill cells expressing the gp72 antigen and is expressed as concentration of immunotoxin producing 50% inhibition of thymidine uptake. MOLT-4, a malignant T cell line lacking the gp72 antigen, is used as the negative cell line.

There are several tumor derived cell lines

10 that carry the gp72 antigen and are specifically killed
by XMMCO-791-RTA, as determined using various assays,
all of which measure decreased protein synthesis
(75 Se-Selenomethionine) or cell division (thymidine
incorporation). Cell lines carrying the gp72 antigen

15 include the colon carcinoma derived cell line C170,
used in the flow cytometry analysis of various
immunotoxin lots, and colon carcinoma derived cell line
LS174.

791T cells or MOLT-4 cells were grown in se20 rum-free medium for 4 to 7 days in T75 tissue culture
flasks. 791T, an adherent cell line, was harvested
using trypsin-EDTA (Gibco Labs) because it leaves the
gp72 antigen intact. MOLT-4 is a suspension cell line.
Cells were adjusted to the appropriate concentration,
25 and the concentration used was related to the cells'
rate of growth.

For convenience, the assay was carried out on cells in suspension. To prevent 791T cells from adhering during the assay, cells were plated into non-tissue 30 culture coated NUNC 96-well round bottom plates, 100µl/well to a final concentration of 2 x 10<sup>4</sup> cells/well (791T) or 4 x 10<sup>4</sup> cells/well (MOLT-4).

Immunotoxin dilutions were prepared using

test tubes precoated with BSA. One hundred µl of each dilution were added to four wells containing cells, for

final concentrations of 2.5 to 250,000 ng/ml. The RTA was diluted in a similar fashion to yield final concentrations of 500  $\mu$ g/mg to  $50\mu$ g/ml. After a 48-hour incubation at 37°C and 5% CO<sub>2</sub>, 1  $\mu$ Ci of <sup>3</sup>H-Thymidine was added to each well. After another 24-hour incubation, cells were harvested on filter pads and counted.

#### b. Results

Each assay of a lot included testing of the immunotoxin against 791T and MOLT-4 cells. Additionally, free RTA was sometimes tested against 791T cells. When the  ${\rm IC}_{50}$  values of immunotoxin or free RTA against 791T cells were compared in terms of RTA molarity, the  ${\rm IC}_{50}$  of the immunotoxin was more than three logs ( ${\rm Log}_{10}$ ) that of the free RTA. Also, there was a 3-log $_{10}$  difference between  ${\rm IC}_{50}$  of XMMCO-791-RTA immunotoxin against 791T and MOLT-4 cells. The  ${\rm IC}_{50}$  of XMMCO-791-RTA on negative control MOLT-4 cells (in RTA equivalents) was very similar to that of free RTA on 791T cells.

Table XIX summarizes the  $\rm IC_{50}$  of the replicate and production lots in terms of nanograms/ml and molarity of RTA. Although the  $\rm IC_{50}$  values were quite similar, there was a loss of potency as the conjugation ratio increased, reflected by a higher  $\rm IC_{50}$ .

## c. Summary

The whole cell kill assay measures the

25 potency of intact immunotoxin. There was minimal lot
to lot variability, as shown by the results with the
three replicate lots. Even though the production lot
had a decrease in binding due to the higher conjugation
ratio, the IC<sub>50</sub> was still similar to those of the rep
30 licate lots. This may mean the decreased binding was
somewhat compensated for by the increased number of RTA
molecules. These IC<sub>50</sub> values were similar to those
seen with other immunotoxins.

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			791T	-			MOLT-	4
5	Lot	RTA: MoAb	Ratio ng/ml	Molarity Immunot	(10 <sup>-11</sup> )		Molari [mmunot	
	51016A	3.0	6.9	2.9	8.7	11858	4.9	14700
	51016B	3.2	6.8	2.8	8.9	9614	3.9	12500
	51016C	3.4	9.6	3.8	12.9	12166	4.8	16400
10	51203	4.2	17.2	4.3	18.1	5903	3.5	14600

# J. XMMCO-791-RTA Therapy of Human Tumor Xenografts

This study was performed to determine the therapeutic efficacy of XMMCO-791-RTA against human tumor xenografts expressing the gp72 antigen that is recognized by the XMMCO-791 antibody.

#### 1. Procedure

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Nude mice were implanted with tumor derived from an established xenograft according. (minced to small lmm pieces) Three to four days after tumor implantation, groups of up to 10 mice received immunotoxin by intraperitoneal injection and their tumor growth was compared with that in controls receiving saline. A range of treatment schedules, including daily injections for 20 days and a protocol involving treatment 3 times per weeks were employed.

#### 2. Results

In all, three lots of immunotoxins were evaluated, Lots 41203B, 50903 and 51203.

There were three xenograft tests using two different conjugates. In the first series, XMMCO-791-RTA (Lot 41203B) was tested against osteogenic sarcoma 791T xenografts using various treat-20 ment protocols. One test scheduled treatment 3 times weekly at a dose of 4.8 mg/kg intraperitoneally for nine doses (total dose 43 mg/kg). Compared with the control group, this produced a significant inhibition of tumor growth (Figure 1). The most effective re-25 sponse with this preparation was achieved in mice receiving eight doses of 12 mg/kg (total dose 96 mg/kg), administered at 2 to 3 day intervals. This is illustrated in Figure 1c, showing that during the treatment there was a marked inhibition of tumor growth. As ex-30 pected, tumor growth was observed in the treated group after cessation of treatment. In this respect, the rate of tumor growth in the treated group was comparable to that in the controls, although it was displaced 35 in terms of tumor size. Figure 1d summarizes these

trials and shows a good correlation between total dose of XMMCO-791-RTA and therapeutic response, even though different dosing schedules were used.

The overall toxicities observed with this immunotoxin are summarized in Figure 1e. As illustrated, there was no mortality with doses up to 100 mg/kg.

5 The only observed effect was a gradual weight loss as doses escalated from 40 mg/kg to 100 mg/kg.

In the second series of trials using XMMCO-791-RTA (Lot 50903), the treatment schedule was 5 mg/kg daily for 20 days (total dose 100 mg/kg). This 10 protocol produced marked inhibition in growth of sarcoma derived 791T xenografts (Figure 2a) and colon carcinoma derived C170 xenografts (Figure 2b). There was significant toxicity, however, with 3/10 mice dying in both tests.

Taking into consideration the experience gained with two immunotoxin preparations, a third series of test were carried out using XMMCO-791-RTA (Lot 51203). The immunotoxin was given in 20 daily doses of 3 mg/kg/day (total dose 60 mg/kg); the response elicit-20 ed against colon carcinoma C170 xenografts demonstrated significant suppression of tumor growth. This is illustrated in Figure 3 which shows growth of colon carcinoma C170 xenografts in immunotoxin-treated mice compared with controls. Furthermore, tumor weights in the immunotoxin treated group were significantly less than those in controls (T/C = 0.52 p <0.02) at the completion of the trial.

# EXAMPLE II - XMMCO-228-RTA CONJUGATES

#### Production of Hybridomas Α.

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Balb/c mice (Bantin & Kingman, U.K.) were immunized with carcinoembryonic antigen (CEA) derived 5 from a perchlorate extract of a colon carcinoma liver metastasis. The immunization schedule consisted of 10 ug CEA in complete Freund's adjuvant (CFA) given intraperitoneally on Days O and 7, and 20 ug of CEA (Also in CFA) given intraperitoneally on Davs 25. 56 10 and 63.

Three days after the last antigen boost. spleen cells from an immunized mouse were aseptically Following procedures as outlined elsewhere (Galfre et al (1977) Nature 266:550, which is incorporated by reference). 106 spleen cells were fused with 10<sup>6</sup> cells of P3-NSI-Ag4-1 (A.T.C.C. Accession No. TIB-18), a hypoxanthine-methotrexate-thymidine (HMT) sensitive murine myeloma cell line. Using polyethylene glycol (PEG), hybrid cells were placed into 96-well culture plates, (Costar, Cambridge, MA #3596) on medium 20 containing a feeder layer of rat peritoneal exudate cells (2.5 x 10 cells/well). Cells were cultured in Dulbecco's Modified Eagle's Medium (Flow Labs, Irvine, U.K.) containing 15% Fetal Calf Serum (Myoclone, Gibco. Paisley, U.K.) and hypoxanthine (10-4 M), thymidine  $(1.6 \times 10^{-5} \text{ M})$  (both from Sigma, Dorset, U.K.) and methotrexate (10<sup>-5</sup> M) (Lederle, Hampshire, U.K.). Within two weeks post fusion, cultures of

hybridoma cells were tested for antibody binding to CEA by enzyme immunoassay (EIA). Cultures that were posi-30 tive were cloned using limiting dilution, plating 1-3 cells/well into 96 well culture plates. Wells containing only one colony were identified by microscopic examination, then tested for reactivity with CEA and normal colon antigen (NCA) by EIA and radioimmunoassay 35

(RIA), and for reactivity on extranuclear membranes from primary colorectal tumors and normal colon by EIA. The clone designated XMMCO-228 was found to stably secrete immunoglobulin which was determined to be of the IgG2a subclass by solid phase RIA using standard methods. Hybridoma XMMCO-228 is presently on deposit with 5 the American Type Culture Collection (A.T.C.C.), 12301 Parklawn Dr., Rockville, MD 20852, USA. The deposit was made on August 14, 1986, and given A.T.C.C. Accession No. HB 9174.

Balb/c mice (Bantin & Kingman, U.K.), 6-10 weeks old, were used to culture the hybridoma 10 peritoneally. Approximately 10<sup>7</sup> hybridoma cells were injected into mice that had been pretreated 3 weeks earlier with 0.5 mls of pristane (Aldridge, Gillingham. Dorset, U.K.) injected intraperitoneally (i.p.). The 15 resultant ascites fluid, collected 3 weeks after injection of the hybridomas, contained on average 5 mg/ml of the antibody as determined by measuring immunoglobulin level according to the method of Price and Baldwin ICRS Med. Sci. (1984) 12:1000-01, which is incorporated by reference.

The antibody in ascites fluid was purified by affinity chromatography using a Sepharose - Protein A column using methods well known by those skilled in the art.

25 The hybridoma was grown in vitro in Dulbecco's Minimal Essential Medium (Flow Labs, Irvine, U.K.) with 10% Fetal Calf Serum (Myoclone, Gibco. Paisley, U.K.) and hypoxanthine  $(10^{-4} M)$ , thymidine  $(1.6 \times 10^{-5} \text{ M})$  (both from Sigma, Dorset, U.K.) and methotrexate ( $10^{-5}$  M) (Lederle, Hampshire, U.K.) in plastic 300 ml bottles. Cell concentration was  $10^5$ cells/ml medium over a culturing period of 4-5 days, with a MoAb concentration of 4 µg/ml medium, and a doubling time of 12 hours. compared to E5).

# B. In Vitro Antibody Binding to Cell Lines Measured by Flow Cytometry

The binding of XMMCO-228 and XMMCO-791 MoAbs to MKN45 cells was determined by flow cytometry employing methods well known to those skilled in the art and described above. The gastric carcinoma cell line MKN45 expresses both the 72kD antigen with which the XMMCO-791 MoAb reacts and the CEA antigen with which XMMCO-228 reacts. B14/B8 is a MoAb directed against breast cancer, which reacts with the normal color antigen (NCA) subsection of the CEA antigen. Normal mouse serum was used as a control. The results are summarized in Table XX.

TABLE XX

# Binding to MKN45 Cells by Flow Cytometry

_		
_	MoAb	Mean Fluorescence Intensity
5	XMMCO-228	987
	B14/B8 XMMCO-791	790
		485
10	Control	15

# C. <u>In Vivo Antibody Binding to Normal Tissues</u> <u>Measured by Immunoperoxidase</u>

The technique for Indirect Immunoperoxidase staining has been described above. Table XXI is a summary of the results obtained with XMMCO-228 MoAbs in humans:

#### TABLE XXI

#### Antibody Binding to Normal Tissues Measured by Immunoperoxidase

COLORECTAL CANCER:

5/5 intense staining of Ca

90%+ of population staining +)

NORMAL COLON:

5/5 intense staining of glandular epith., especially intense apical staining

AUTOPSY TISSUE:

Negative tissue-

10

Pancreas Muscle Liver Skin Heart Testis Spleen Spinal Cord Stomach Aorta Cerebellum

Kidnev

15

Lymph Node

Ouestionable (+/-)

20

Lung

Positive-

Esophagus(+ squamous epith)

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NOTE: glucose oxidase method showed that Ab. 228 does not stain granulocytes. Almost every other antibody that we have studied that is similar to CEA has stained granulocytes.

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It is significant that XMMCO-228 MoAbs do not bind to granulocytes. Normal colon antigen (NCA) appears on such diverse tissues as normal colon. granulocytes, and progenitor bone marrow cells. cause the CEA antigen has a NCA subsection, many anti-CEA MoAbs also bind the NCA on various normal tissues, which XMMCO-228 MoAbs do not.

#### XMMCO-228 Ricin Toxin A Chain (RTA) Conjugates

As in the case of XMMCO-791-RTA conjugates described above, the conjugation technique, including purification of the A chain of ricin, is disclosed in U.S. Patent No. 4,590,071, the disclosures of which are hereby incorporated by reference.

#### XMMCO-228-RTA In Vitro Cytotoxicity

In vitro cytotoxicity of XMMCO-228-RTA conjugates was determined by the 75Se-Selenomethionine Assay. Single cell suspensions of gastric carcinoma 15 derived MKN45 cells were inoculated with immunotoxin or RTA for 15 minutes, washed and added to flat bottomed microtiter plates at a concentration of 105 cells/0.2 ml of immunotoxin or RTA in RPMI medium containing 10% 20 fetal calf serum. Various amounts of immunotoxin were added to each well. Twenty-four hours later,  $^{75}$ Se-Selenomethionine was added to each well. Cultures were further incubated for 16 hours, washed, dried on the bottom of the wells, and the wells were counted in a gamma counter. The results are summarized in Table 25 XXII, expressed in terms of 50% inhibition concen-

tration.

TABLE YYLI
In Vitro Cytotoxicity Against MKN45 Cells

<u>Agent</u>	IC <sub>50</sub> (ng/ml)
RTA	2238
XMMCO-791-RTA	1000
XMMCO-228-RTA	600
XMMCO-791-RTA + XMMCO-228-RTA (50%/50% mixture)	560
Agent	IC <sub>50</sub> (molarity)*
RTA	1 x 10 <sup>-8</sup> M
XMMCO-791-RTA	$3.5 \times 10^{-10} \text{M}$
XMMCO-228-RTA	$1 \times 10^{-10} M$
XMMCO-791-RTA + XMMCO-228-RTA (50%/50% mixture)	$3.5 \times 10^{-10} M$

<sup>\*</sup>Adjusted for equivalent RTA molarity

These data indicate that when XMMCO-791-RTA and XMMCO-228-RTA are administered in a "cocktail" form, the cytotoxicity is at least additive, and possibly synergistic. They also show the efficacy of immunotoxin (or antibody directed RTA) compared to RTA alone.

XMMCO-228-RTA Therapy of Human Tumor Xenografts F. For each data point, 7-10 nude mice were implanted with LS174T cells, a human colon adenocarcinoma derived cell line (A.T.C.C. Accession No. CL 188). Three days post-implant, the first dose of the treat-10 ment compound was administered, followed by 10-20 doses until the schedule dose was completed. The results are summarized in Table XXIII, expressed as a ration of the tumor weight in treated mice divided by the tumor weight in control (untreated) mice. The results. in terms of mean tumor diameter, are summarized graphically in Figure 4.

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### TABLE XYIII

## Therapy of Human Tumor Xenografts With XMMCO-228-RTA

Expt.	Xenograft Tumor	Treatment Schedul Compound Dose mg/kg	Tumor Weight Treated
1	LS 174T	RTA 20	. 0.70
2	LS 174T	XMMCO-228 80	1.18
3	LS 174T	XMMCO-228-RTA 56	0.36

These results demonstrate the efficacy of XMMCO-228-RTA in the therapy of human tumor xenografts.

#### EXAMPLE III - XMMCO-791-RTA AND XMMOC-228-RTA COCKTAILS

A. <u>XMMCO-791-RTA + XMMCO-228-RTA Conjugate Cocktails</u>
A cocktail of XMMCO-791-RTA and XMMCO-228-RTA consists of a mixture of XMMCO-791-RTA and XMMCO-228-RTA, in any ratio, and administered to a cancer cell host in a dose range of about 0.01 mg/kg/day to 20.0 mg/kg/day. The cocktail is administered perenterally, generally by intravenous infusion or intrapercitoneal injection in a suitable vehicle, such as phosphate buffered saline or the like.

#### 10 B. In Vitro Cytotoxicity of Conjugate Cocktails

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alone.

In vitro cytotoxicity of XMMCO-228-RTA conjugates was determined by the  $^{75}$ Se-Selenomethionine assay. Single cell suspensions of gastric carcinoma derived MKN45 cells were inoculated with immunotoxin or RTA for 15 minutes, washed and added to flat bottomed microtiter plates at a concentration of  $10^5$  cells/0.2 ml of immunotoxin or RTA in RPMI medium containing 10% fetal calf serum. Various amounts of immunotoxin were added to each well. Twenty-four hours later.

75 Se-Selenomethionine was added to each well. Cultures were further incubated for 16 hours, washed, dried on the bottom of the wells, and the wells were counted in a gamma counter. The results are summarized in Table XXII above, expressed in terms of 50% inhibition concentration.

These data indicate that when XMMCO-791-RTA and XMMCO-228-RTA are administered in a "cocktail" form, the cytotoxicity is at least additive, and possibly synergistic. They also show the efficacy of immunotoxin (or antibody) directed RTA compared to RTA

## C. XMMCO-791-RTA + XMMCO-228-RTA Conjugate Cocktail Therapy of Human Tumor Xenografts

For each data point, 7-10 nude mice were im-35 planted with MKN 45 cells, derived cell line. Three days post-implant, the first dose of the treatment compound was administered, followed by 10-20 doses until the scheduled dose was completed. The results are summarized in Table XXIV, expressed as a ratio of the tumor weight in treated mice divided by the tumor weight in control (untreated) mice.

#### TABLE XXIV

## Therapy of Human Tumor Xenografts With XMMCO-228-RTA

Expt.	Xenograft Tumor	Treatment 5	Schedule Dose mg/kg	Response: Tumor Weight Treated Tumor Weight Control
1	MKN 45	XMMCO-228-RTA	A 25 25	. 0.74 1.1
2	MKN 45	XMMCO-228-RT		0.56
10		XMMCO-791-RT	А .	-

 $<sup>\</sup>pm 25~\mathrm{mg/kg}$  each of XMMCO-228-RTA and XMMCO-791-RTA administered as a mixture.

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These data indicate that when XMMCO-791-RTA and XMMCO-228-RTA are administered in a "cocktail" form, the cytotoxicity is at least additive, and possibly synergistic. They also show the efficacy of a cocktail consisting of XMMCO-791-RTA and XMMCO-228-RTA in treating cancer cells in a host.

The present invention provides efficacious, novel compounds and methods for the therapy of various cancer cells. The cytotoxic conjugates are particularly efficacious when administered in cocktail form.

Although the present invention has been described in some detail by way of illustration and example for purposes of clarity of understanding, it will
be obvious that certain changes and modifications may
be practiced within the scope of the appended claims.

### WHAT IS CLAIMED IS:

- A cytotoxic conjugate, comprising a ribosomal inhibiting protein bound to an immunoglobulin that defines an epitope on a tumor associated glycoprotein antigen of about 72 kD m.w., said conjugate having the ability to bind said epitope.
- The cytotoxic conjugate according to Claim 1, wherein the immunoglobulin is produced by hybridoma XMMCO-791 having A.T.C.C. Accession No. HB 10 9173.
- A cytotoxic conjugate, comprising a toxin bound to an immunoglobulin that defines an epitope on carcinoembryonic antigen, said conjugate having the ability to bind said epitope.
- The cytotoxic conjugate according to Claim 3, wherein the immunoglobulin is produced by hybridoma XMMCO-228 having A.T.C.C. Accession No. HB
   9174.
  - 5. The cytotoxic conjugate according to Claim 3, wherein the toxin is a ribosomal inhibiting protein.
- 6. The cytotoxic conjugate according to either of Claims 1 or 5, wherein the ribosomal inhibiting protein is a lectin A chain purified with anti-lectin B chain antibodies.
  - 7. The cytotoxic conjugate according to Claim 6, wherein the lectin A chain is ricin A Chain purified with anti-ricin B chain antibodies.

- 8. The cytotoxic conjugate according to Claim 6, wherein the lectin A chain is abrin A Chain purified with anti-abrin B chain antibodies.
- 9. A cytotoxic therapeutic cocktail comprising:
- 5 a first conjugate of a toxin bound to an immunoglobulin that defines an epitope on a tumor associated antigen of about 72 kD m.w.; and
- a second conjugate of a toxin bound to an immunoglobulin that defines an epitope on carcinoembryonic antigen.
- The cytotoxic cocktail according to Claim 9, wherein the immunoglobulin of the first conjugate is that produced by hybridoma XMMCO-791 having A.T.C.C.
   Accession No. HB 9173.
- The cytotoxic cocktail according to Claim
   wherein the immunoglobulin of the first conjugate is that produced by hybridoma XMMCO-228 having A.T.C.C.
   Accession No. HB 9174.
- The cytotoxic cocktail according to Claim 10, wherein the immunoglobulin of the second conjugate is that produced by hybridoma XMMCO-228 having A.T.C.C.
   Accession No. HB 9174.
  - 13. The cytotoxic cocktail according to Claim 9, wherein the toxin of the first and second conjugates is a ribosomal inhibiting protein.
  - 14. The cytotoxic conjugate according to Claim 13, wherein the ribosomal inhibiting protein is a lectin A chain purified with anti-lectin B chain anti-bodies.

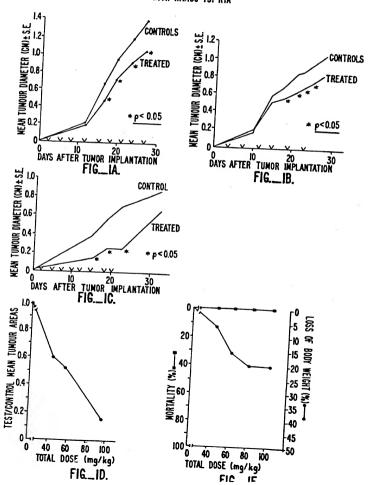
- 15. The cytotoxic conjugate according to Claim 14, wherein the lectin A chain is ricin A Chain purified with anti-ricin B chain antibodies.
- 16. The cytotoxic conjugate according to Claim 14, wherein the lectin A chain is abrin A Chain 5 purified with anti-abrin B chain antibodies.
  - 17. The cytotoxic conjugate according to Claim 14, wherein the lectin A chain of the first conjugate is ricin A chain purified with anti-ricin B chain antibodies and the lectin A chain of the second conjugate is abrin A chain purified with anti-abrin B chain antibodies.
- 18. The use of the cytotoxic conjugate according to claim 1 in preparing compositions for the treatment of cancer.
  - 19. The use of the cytotoxic conjugate according to claim 3 in preparing compositions for the treatment of cancer.
- 20. The use of the cytotoxic cocktail according 20 to claim 9 in preparing compositions for the treatment of cancer.
- 21. The use according to either of claims 18 or 19, wherein the therapeutic dose of the cytotoxic conjugate is approximately 0.01 mg to 20.0 mg per kg of host body weight per day.

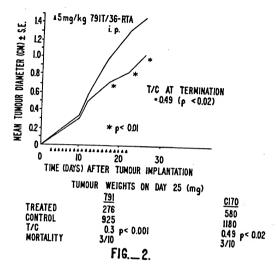
- 22. The use according to either of claims 18 or 19, wherein the therapeutic dose of the cytotoxic conjugate is approximately 0.05 mg to 5.0 mg per kg of host body weight per day.
- 23. The use according to claim 20, wherein the therapeutic dose of the cytotoxic cocktail is approximately 0.01 mg to 20.0 mg per kg of host body weight per day.

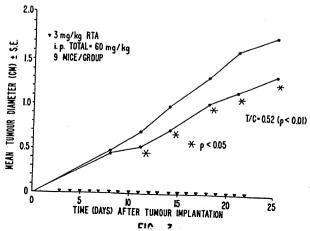
5

- 24. The use according to claim 20, wherein the therapeutic dose of the cytotoxic cocktail is approximately 0.05 mg to 5.0 mg per kg of host body weight per day.
  - \$25.\$ The use according to any of claims 18, 19, or 20, for the treatment of colon carcinoma.
  - 26. The use according to any of claims 18, 19 or 20 for the treatment of ovarian carcinoma.
  - 27. The use according to any of claims 18, 19, or 20 for the treatment of osteogenic sarcoma.
  - 28. Hybridoma XMMCO-228 having A.T.C.C. Accession No. HB 9174 which produces an immunoglobulin that defines an epitope on carcinoembryonic antigen.
- 29. A kit for the treatment of cancer cells, comprising compositions according to any of claims 1, 3 or 9.

THERAPY OF MICE BEARING XENOGRAFTS OF SARCOMA 791T WITH XMMCO-791-RTA







### INFLUENCE OF RTA-228 ON GROWTH OF LSI74T XENGGRAFTS

